United States Bankruptcy Court Northern District of Ohio, Western Division

In re	Paul Wenzel, Jr.		Case No	14-32432
-		Debtor ,	,	
			Chapter	13

SUMMARY OF SCHEDULES - AMENDED

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	101,700.00		
B - Personal Property	Yes	3	56,326.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		143,697.93	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		29,686.08	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,512.55
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,145.00
Total Number of Sheets of ALL Schedu	ıles	17			
	To	otal Assets	158,026.00		
			Total Liabilities	173,384.01	

United States Bankruptcy Court Northern District of Ohio, Western Division

In re	Paul Wenzel, Jr.		Case No.	14-32432
		Debtor	_,	
			Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 12)	3,512.55
Average Expenses (from Schedule J, Line 22)	3,145.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	4,203.51

State the following:

	-	_
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		26,467.93
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		29,686.08
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		56,154.01

In re	Paul Wenzel, Jr.		Case No	14-32432	
-	·	,			
		Debtor			

SCHEDULE A - REAL PROPERTY - AMENDED

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

4451 2861	th St., Toledo, OH	Fee simple	-	101,700.00	119,997.93
	Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > 101,700.00 (Total of this page)

101,700.00 Total >

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

In re	Paul Wenzel, Jr.	Case No	14-32432

Debtor

SCHEDULE B - PERSONAL PROPERTY - AMENDED

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Χ			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Hunt	ngton Bank checking and savings	-	882.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	room	e, refrigerator, washer/dryer, microwave, living furniture, dining room furniture, TVs,DVD player, pom furniture, dressers, lamps, computer, printer,	-	2,300.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Х			
6.	Wearing apparel.	perso	onal clothing	-	300.00
7.	Furs and jewelry.	Χ			
8.	Firearms and sports, photographic, and other hobby equipment.	Χ			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		h Roman Catholic Union of America policy-mother ficiary	-	0.00
10.	Annuities. Itemize and name each issuer.	X			
				Sub-Tota	al > 3,482.00
			(Total	of this page)	aı / 3,402.UU

2 continuation sheets attached to the Schedule of Personal Property

In re Paul Wenzel, Jr.

Case No.	14-3243
Cube 110.	1 1 02 10

Debtor

SCHEDULE B - PERSONAL PROPERTY - AMENDED

(Continuation Sheet)

			(
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	410(k)		-	37,314.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	Χ			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Х			
				Sub-Tota	al > 37,314.00
			(To	tal of this page)	

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

In re Paul Wenzel, Jr.

Case No.	14-3243
Cube 110.	1 1 02 10

Debtor

SCHEDULE B - PERSONAL PROPERTY - AMENDED

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	201	1 Ford F-150 XLT	-	15,530.00
26.	Boats, motors, and accessories.	Х			
27.	Aircraft and accessories.	Χ			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	Χ			
31.	Animals.	Χ			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	Х			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

Total > 56,326.00

Sheet 2 of 2 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

15,530.00

In re	Paul Wenzel, Jr.			Case No	14-32432	
-		Debtor	_,			

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT - AMENDED

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte
□ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
11 II C C 8522(b)(2)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, Cert Huntington Bank checking and savings	tificates of Deposit Ohio Rev. Code Ann. § 2329.66(A)(3) Ohio Rev. Code Ann. § 2329.66(A)(18)	450.00 432.00	882.00
Household Goods and Furnishings Stove, refrigerator, washer/dryer, microwave, living room furniture, dining room furniture, TVs,DVD player, bedroom furniture, dressers, lamps, computer, printer, desk	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	2,300.00	2,300.00
Wearing Apparel personal clothing	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	300.00	300.00
Interests in IRA, ERISA, Keogh, or Other Pension or 410(k)	Profit Sharing Plans Ohio Rev. Code Ann. § 2329.66(A)(10)(b)	37,314.00	37,314.00

Total: 40,796.00 40,796.00

0 continuation sheets attached to Schedule of Property Claimed as Exempt

In re	Paul Wenzel, Jr.	Case No	14-32432

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS - AMENDED

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	L Q U L	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY	
Account No.			Home Equity Loan	Т	D A T E D				
Charter One PO Box 42008 Providence, RI 02940-2008		-	4451 286th St., Toledo, OH		D				
			Value \$ 101,700.00				9,569.93	9,569.93	
Account No.			First Mortgage						
Chase Bank PO Box 78420 Phoenix, AZ 85062		-	4451 286th St., Toledo, OH						
			Value \$ 101,700.00	1			110,428.00	8,728.00	
Account No. Ford Motor Credit PO Box 552679 Detroit, MI 48255-2679		-	Purchase Money Security 2011 Ford F-150 XLT					2.472.22	
Account No.	╀	╁	Value \$ 15,530.00	┢	_	-	23,700.00	8,170.00	
Account No.			Value \$						
0 continuation sheets attached	Subtotal (Total of this page) 143,697.93 26,467.93								
Total (Report on Summary of Schedules) 143,697.93 26,467.93									

B6E (Official	Form	6E) (4/13)
---------------	------	-------	-------

In re	Paul Wenzel, Jr.	Case No14-32432
		Debtor ,
SC	CHEDULE E - CREDITORS HO	OLDING UNSECURED PRIORITY CLAIMS - AMENDED
to privace on the school of th	cority should be listed in this schedule. In the boxes prount number, if any, of all entities holding priority claim muation sheet for each type of priority and label each was the complete account number of any account the debt a minor child is a creditor, state the child's initials and ot disclose the child's name. See, 11 U.S.C. §112 and lift any entity other than a spouse in a joint case may be tule of creditors, and complete Schedule H-Codebtors. on each claim by placing an "H," "W," "J," or "C" in an labeled "Contingent." If the claim is unliquidated, pouted." (You may need to place an "X" in more than on Report the total of claims listed on each sheet in the boat of the total of amounts entitled to priority listed of on this Schedule E in the box labeled "Totals" on the on the Statistical Summary of Certain Liabilities and Report the total of amounts not entitled to priority listed.	or has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to de the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Fed. R. Bankr. P. 1007(m). jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the olace an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled no of these three columns.) ox labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled this total also on the Summary of Schedules. n each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total elated Data. d on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to "on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this
_	theck this box if debtor has no creditors holding unsec	
TYP	PES OF PRIORITY CLAIMS (Check the approx	oriate box(es) below if claims in that category are listed on the attached sheets)
_	Domestic support obligations	The contest sees in a case of the listed on the database should
C	claims for domestic support that are owed to or recover	rable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative nestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
C	Extensions of credit in an involuntary case claims arising in the ordinary course of the debtor's bus the order for relief. 11 U.S.C. § 507(a)(3).	siness or financial affairs after the commencement of the case but before the earlier of the appointment of a
repre		severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales 0 days immediately preceding the filing of the original petition, or the cessation of business, whichever 4).
	Contributions to employee benefit plans	
	Money owed to employee benefit plans for services ren hever occurred first, to the extent provided in 11 U.S.C	dered within 180 days immediately preceding the filing of the original petition, or the cessation of business, C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150*	per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals	
	claims of individuals up to \$2,775* for deposits for the ered or provided. 11 U.S.C. § 507(a)(7).	purchase, lease, or rental of property or services for personal, family, or household use, that were not
	axes and certain other debts owed to government	
T	axes, customs duties, and penalties owing to federal, s	tate, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to maintain the capital of an inst	
		tor of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal ntain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
\Box (laims for death or personal injury while debt	or was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

__ continuation sheets attached

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re	Paul Wenzel, Jr.		Case No	14-32432	-
	Debt	or			

AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	СОДШВНОК	Hu: H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UZU-GD-DAF	Į	J T	AMOUNT OF CLAIM
Account No.			personal loan	Т	T E D			
Asset Acceptance 7027 Miller Rd. Warren, MI 48092		-				>	×	4,946.00
Account No. 5178-0589-8625-2560			Credit card purchases		Н	H	†	
Capital One PO Box 5294 Carol Stream, IL 60197-5294		-						759.32
Account No.			Credit card purchases		П	T	T	
Chase Manhattan Bank USA PO Box 15298 Wilmington, DE 19886		-						4,639.00
Account No.			credit charges		П	T	T	
Credit First/Firestone PO Box 81083 Cleveland, OH 44181		-						1,202.00
_3 continuation sheets attached				Subt			1	11,546.32
			(Total of t	his i	pag	ξe)) [,

In re	Paul Wenzel, Jr.	_,	Case No. <u>14-32432</u>
-	Debtor		

AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	16	1	wheel Wife him or Occurrent	- 1	_		Б	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H H	CONSIDERATION FOR CLAIM. IF CLAI IS SUBJECT TO SETOFF, SO STATE.	Л	COZHLZGEZ	UNLIQUIDATE	ローのPUTED	AMOUNT OF CLAIM
Account No. 4447-9622-3157-2805			Credit card purchases		Т	E		
Credit One Bank PO Box 60500 City Of Industry, CA 91716-0500		-				D		551.90
Account No. 008315769	╁	$\frac{1}{1}$	assigned accounts					
Finance System of Toledo PO Box 351297 Toledo, OH 43635		-						159.56
Account No. 0030017757	t	T	assigned accounts		T			
Finance System of Toledo PO Box 351297 Toledo, OH 43635		-						78.07
Account No. C2PO19007864	t		assigned accounts					
Financial Services Ltd Partnership 7322 Southwest Fwy Suite 1600 Houston, TX 77074-2053		-						3,340.00
Account No. 6369921011822631	t	t	credit charges		_			
Fingerhut PO Box 166 Newark, NJ 07101-0166		-						2,498.00
Sheet no. 1 of 3 sheets attached to Schedule of	_		1	Su	ıbt	ota	1	0.007.50
Creditors Holding Unsecured Nonpriority Claims			(Tot	l of thi	is p	oag	e)	6,627.53

In re	Paul Wenzel, Jr.		 Case No	14-32432	_
		Debtor			

AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

C O D E B T O R	N H		ON	N L	S	
_	С	CONSIDERATION FOR CLAIM. IF CLAIM	T I N G E N	I QU I DATE	D I S P U T E D	AMOUNT OF CLAIM
		personal loan	T	E		
	-			D		6,740.00
	t	medical charges		+	+	.,
	-					100.94
+	+	assigned accounts/City of Toledo	+	+		
	-					145.00
	+	medical charges		+	\dagger	
	-					1,053.33
\dashv	+	assigned accounts		+	\dagger	
	-					1,083.45
of		<u>I</u>				9,122.72
	of	of	assigned accounts/City of Toledo medical charges assigned accounts of	assigned accounts/City of Toledo medical charges assigned accounts Sub	- medical charges - assigned accounts/City of Toledo - medical charges - assigned accounts - Subtot	medical charges assigned accounts/City of Toledo medical charges medical charges assigned accounts -

In re	Paul Wenzel, Jr.	Case No. <u>14-32432</u>	_
_		,	

Debtor

AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community UZL_QU_D4FWD CODEBTOR CONTINGENT CREDITOR'S NAME, MAILING ADDRESS DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE. W CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBER J AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. С (See instructions above.) Account No. 6048700000359048 credit charges Wells Fargo Financial Cards PO Box 660041 Dallas, TX 75266-0041 2,389.51 Account No. Account No. Account No. Account No. Sheet no. 3 of 3 sheets attached to Schedule of Subtotal 2,389.51 Creditors Holding Unsecured Nonpriority Claims (Total of this page) Total 29,686.08

Software Copyright (c) 1996-2014 - Best Case, LLC - www.bestcase.com

(Report on Summary of Schedules)

In re	Paul Wenzel, Jr.		Case No. 14-32432	
-		Debtor	-,	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES - AMENDED

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

In re	Paul Wenzel, Jr.		Case No1	14-32432	
_	·				
		Debtor			

SCHEDULE H - CODEBTORS - AMENDED

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CREDITOR

O continuation sheets attached to Schedule of Codebtors

					_				
Fill	in this information to identify your ca	ase:							
Del	btor 1 Paul Wenzel	, Jr.							
	btor 2 puse, if filing)								
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF OHIO, WESTE	RN					
Ca	se number14-32432				Che	eck if this is:			
(If k	nown)		•			An amende	d filing		
_							ent showing pas of the follo	oost-petition owing date:	chapter
<u>O</u>	fficial Form B 6I					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12/13
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your s th you, do not includ	spouse is liv de informati	ing wit	h you, inclu ut your spo	ude informa use. If more	tion about y space is n	our eeded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filin	g spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional	zp.oyone otatao	□ Not employed			☐ Not er	mployed		
	employers.	Occupation	Project manager						
	Include part-time, seasonal, or self-employed work.	Employer's name	Tanner Supply Co	O.					
	Occupation may include student or homemaker, if it applies.	Employer's address	7385 Express Temperance, MI	48182					
		How long employed the	here? 16 years	5		_			
Pa	rt 2: Give Details About Mor	nthly Income							
	imate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	eport for any	line, wri	ite \$0 in the	space. Inclu	de your non-	filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all empl	oyers fo	or that perso	n on the line	s below. If yo	ou need
					For Do	ebtor 1	For Debto		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$		3,937.51	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3. +\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4. \$	3,9	937.51	\$	N/A	

Deb	tor 1	Paul Wenzel, Jr.	_	Case	e number (if known)	14-324	32	
	Copy	y line 4 here	4.	Fo	or Debtor 1 3,937.51		btor 2 or ing spouse N/A	
5.	List	all payroll deductions:		_				
0.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$ \$ \$	843.29 0.00 0.00 0.00 247.67 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,090.96	\$	N/A	
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,846.55	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: gas allowance	8c. 8d. 8e.	\$	0.00 0.00 0.00 0.00 0.00 0.00 400.00		N/A N/A N/A N/A N/A N/A N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_ \$_	266.00	\$ \$	N/A N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,512.55 + \$		N/A = \$ <u>3</u>	,512.55
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your friends or relatives. iot include any amounts already included in lines 2-10 or amounts that are not cify:	r depen		•		edule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset hat amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 3	
13.	Do y ■ □	vou expect an increase or decrease within the year after you file this form No. Yes. Explain:	1?				monthly	ilcome

Fill	in this informa	ation to identify yo	our case:					
Deb	otor 1	Paul Wenzel,	Jr.			Che	eck if this is:	
			-		_		An amended filing	
	otor 2							ving post-petition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankı	ruptcy Court for the:	NORTH DIVISIO	HERN DISTRICT OF OHIO DN	, WESTERN		MM / DD / YYYY	
	e number 14	4-32432					A separate filing fo 2 maintains a sepa	r Debtor 2 because Debtor rate household
Of	fficial Fo	rm B 6J	_					
S	chedule	J: Your I	Exper	nses				12/13
Be info nur	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	possible. eded, atta y questio	. If two married people are	e filing together, bo form. On the top of a	th are equant	ually responsible fo ional pages, write y	or supplying correct rour name and case
Par 1.	t 1: Desci Is this a joir	ribe Your House nt case?	hold					
	No. Go to							
	☐ Yes. Doe	es Debtor 2 live i	n a separ	ate household?				
	□ N □ Y		st file a sep	parate Schedule J.				
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 1		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents'	names.						Yes
								□ No
							_	☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses o	penses include f people other tl d your depende	^{nan} ┌─	No Yes				
exp	imate your ex	a date after the b	our bankrı	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance and		government assistance if cluded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home owners		ses for your residence. In	nclude first mortgage	4.	\$	870.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.		0.00
	•	•		upkeep expenses		4c.	\$	100.00
		owner's associat				4d.	·	0.00
5.	Additional ı	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$	230.00

Paul Wenzel, Jr.	Case Hulli	ber (if known)	14-32432
tine:			
	62	\$	150.00
· · · · · · · · · · · · · · · · · · ·			50.00
			40.00
		·	
		*	9.00
		·	300.00
		·	0.00
er er			50.00
•			50.00
•	11.	\$	8.00
•	12	\$	400.00
			205.00
		·	
•	14.	Ψ	50.00
Life insurance	15a.	\$	15.00
Health insurance			0.00
		·	78.00
		· —	0.00
		Ť ———	0.00
	16.	\$	0.00
·		·	0.00
Car payments for Vehicle 1	17a.	\$	540.00
Car payments for Vehicle 2	17b.	\$	0.00
• •	17c.	\$	0.00
			0.00
		<u> </u>	
ucted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	\$	0.00
er payments you make to support others who do not live with you.		\$	0.00
cify:	19.		
			0.00
Real estate taxes			0.00
Property, homeowner's, or renter's insurance			0.00
Maintenance, repair, and upkeep expenses		\$	0.00
Homeowner's association or condominium dues	20e.	\$	0.00
er: Specify:	21.	+\$	0.00
r monthly expenses. Add lines 4 through 24		e	2 145 00
	22.	Ψ	3,145.00
	23a	\$	3,512.55
			3,145.00
Copy your monthly expended from the ZZ above.	200.	<u> </u>	3,140.00
Subtract your monthly expenses from your monthly income			
	23c.	\$	367.55
ou expect an increase or decrease in your expenses within the year after y			ase or decrease because of a
	Health insurance Vehicle insurance Other insurance. Specify: as. Do not include taxes deducted from your pay or included in lines 4 or 20. cify: allment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: If payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule I, Your Income (Official Form 6I). For payments you make to support others who do not live with you. cify: For real property expenses not included in lines 4 or 5 of this form or on Schemotogages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues For Specify: If monthly expenses. Add lines 4 through 21. It result is your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22 above. Subtract your monthly expenses from your monthly income. The result is your monthly net income. You expect an increase or decrease in your expenses within the year after y example, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services 6c. Other. Specify: trash pickup 6d. d and housekeeping supplies 6d. and housekeeping supplies 6d. and housekeeping supplies 6d. and dental expenses 8. hing, laundry, and dry cleaning 9. sonal care products and services 10. icial and dental expenses 11. issportation. Include gas, maintenance, bus or train fare. 12. include car payments. 13. irritable contributions and religious donations 14. irrance. 15. include insurance deducted from your pay or included in lines 4 or 20. 16. Life insurance 15. Health insurance 15. Other insurance. Specify: 15. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. and payments for Vehicle 1 15. Car payments for Vehicle 1 15. Car payments for Vehicle 2 15. Other. Specify: 16. Other. Specify: 17. Other. Specify: 18. De reapyments of allimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule 1, Your Income (Official Form 61). 18. er payments of allimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule 1, Your Income (Official Form 61). 18. er payments on the property 19. er real property expenses not included in lines 4 or 5 of this form or on Schedule 1: You Mortgages on other property 19. er real property expenses not included in lines 4 or 5 of this form or on Schedule 1: You Mortgages on other property 19. er real property expenses not included in lines 4 or 5 of this form or on Schedule 1: You monthly expenses. 20a. Real estate taxes 20b. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20d. Homeowner's association or condominium dues 21. Specify: 22. result is your monthly expenses from line 22 above. 23b. Subtract your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from line 22 above. 23c. ovo	Electricity, heat, natural gas Water, sewer, garbage collection Felephone, cell phone, Internet, satellite, and cable services Other. Specify: trash pickup da and housekeeping supplies 7. \$ da and housekeeping supplies 8. \$ shing, laundry, and dry cleaning 8. \$ sonal care products and services 10. \$ 11. \$ sical and dental expenses 11. \$ supportation. Include gas, maintenance, bus or train fare. 11. \$ supportation. Include gas, maintenance, bus or train fare. 12. \$ supportation. Include gas, maintenance, bus or train fare. 13. \$ strainment, clubs, recreation, newspapers, magazines, and books 13. \$ strainment, clubs, recreation, newspapers, magazines, and books 13. \$ strainment, clubs, recreation, newspapers, magazines, and books 13. \$ strainment, clubs insurance deducted from your pay or included in lines 4 or 20. Life insurance 15. \$ United insurance

United States Bankruptcy Court Northern District of Ohio, Western Division

In re	Paul Wenzel, Jr.		Case No.	14-32432
_		Debtor(s)	Chapter	13

DECLARATION CONCERNING DEBTOR'S SCHEDULES - AMENDED

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of per sheets, and that they are true and corre		ad the foregoing summary and schedules, consisting of _y knowledge, information, and belief.	19
Date	March 30, 2015	Signature	/s/ Paul Wenzel, Jr. Paul Wenzel, Jr. Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court

		Northern I	District of Ohio, Wester	n Division	
In	n re Paul Wenzel, Jr.		Debtor(s)	Case No. Chapter	14-32432 13
			· · · · · · · · · · · · · · · · · · ·	•	
		CHAPT	ER 13 PLAN - AME	NDED	
۱.			her future income of the De shall pay to the trustee the		he supervision and control of month for 60 months.
	Total of plan payments:	\$15,000.00			
2.	Plan Length: This plan i	s estimated to be for 60 m	onths.		
3.	Allowed claims against	the Debtor shall be paid in	accordance with the provis	ions of the Bankrupt	cy Code and this Plan.
			lien or security interest in otcy law, or (b) discharge un		arlier of (a) the payment of the 8.
	under 11 U.S.C. § 1 which is due or wil	301, and which are separal become due during the come	tely classified and shall file	their claims, includi and payment of the a	y are enjoined from collection ng all of the contractual interest mount specified in the proof of gor.
	c. All priority creditor	rs under 11 U.S.C. § 507 sl	nall be paid in full in deferre	ed cash payments.	
1.	From the payments rece	ived under the plan, the tru	ustee shall make disburseme	ents as follows:	
		enses 10.00% unpaid portion): NONE aid portion): NONE			
	b. Priority Claims und	er 11 U.S.C. § 507			
	(1) Domestic Suppo	ort Obligations			
	(a) Debtor is re	quired to pay all post-petit	tion domestic support obliga	ations directly to the	holder of the claim.
	(b) The name(s 101(14A) and 1		older of any domestic suppo	rt obligation are as fo	bllows. See 11 U.S.C. §§
	-NONE-				
	under 11 U.S.C	C. § 507(a)(1) will be paid a secured by personal proper	in full pursuant to 11 U.S.C	. § 1322(a)(2). These	ed in this Plan, priority claims claims will be paid at the same ad arrearage claims for assumed
	Creditor (N -NONE-	Vame and Address)	Estimated arrear	age claim Pro	jected monthly arrearage payment
		§§ 507(a)(1)(B) and 1322 ble by a governmental unit		tic support obligation	a claims are assigned to, owed
	Claimant	and proposed treatment:	-NONE-		
	(2) Other Priority C	laims.			
	Name			Amount of Claim	Interest Rate (If specified)

Software Copyright (c) 1996-2014 Best Case, LLC - www.bestcase.com

-NONE-

Best Case Bankruptcy

c. Secured Claims

(1) Pre-Confirmation Adequate Protection Payments. Pre-confirmation adequate protection payments to the following Creditors holding allowed claims secured by a purchase money security interest in personal property shall be paid by the Trustee through the plan as provided below. Adequate protection payments shall not accrue or be paid until the Creditor files a proof of claim. The principal amount of the Creditor's claim shall be reduced by the amount of the adequate protection payments remitted.

Name Description of Collateral Pre-Confirmation Monthly Payment -NONE-

(2) Secured Debts Which Will Not Extend Beyond the Length of the Plan

(a) Secured Claims Subject to Valuation Under § 506. The Debtor moves the Court to value collateral as follows according to 11 U.S.C. § 506(a). Each of the following secured claims, if allowed, shall be paid through the plan in equal monthly payments set forth below, until the secured value or the amount of the claim, whichever is less, has been paid in full. Any remaining portion of the allowed claim shall be treated as a general unsecured claim. Any claim with a secured value of \$0 shall be treated as a general unsecured claim.

Proposed Amount of
Name Allowed Secured Claim Monthly Payment Interest Rate (If specified)
-NONE-

(b) Secured Claims Not Subject to Valuation Under § 506. Each of the following claims, if allowed, shall be paid through the plan in equal monthly payments set forth below, until the amount of the claim as set forth in the Creditor's proof of claim has been paid in full.

Proposed Amount of
Name Allowed Secured Claim Monthly Payment Interest Rate (If specified)

-NONE-

(3) Secured Debts Which Will Extend Beyond the Length of the Plan

Name Amount of Claim Monthly Payment Interest Rate (If specified)
-NONE-

d. Unsecured Claims

(1) Special Nonpriority Unsecured: Debts which are co-signed or are non-dischargeable shall be paid in full (100%).

Name Amount of Claim Interest Rate (If specified)
-NONE-

(2) General Nonpriority Unsecured: Other unsecured debts shall be paid 24 cents on the dollar and paid pro rata, with no interest if the creditor has no Co-obligors, provided that where the amount or balance of any unsecured claim is less than \$10.00 it may be paid in full.

5. The Debtor proposes to cure defaults to the following creditors by means of monthly payments by the trustee:

Creditor Amount of Default to be Cured Interest Rate (If specified)
-NONE-

6. The Debtor shall make regular payments directly to the following creditors:

Name Amount of Claim Monthly Payment Interest Rate (If specified)
Ford Motor Credit 15,530.00 0.00 0.00%

7. The employer on whom the Court will be requested to order payment withheld from earnings is: NONE. Payments to be made directly by debtor without wage deduction.

8. The following executory contracts of the debtor are rejected:

Software Copyright (c) 1996-2014 Best Case, LLC - www.bestcase.com

Other Party -NONE-	Description of C	Contract or Lease				
9. Property to Be Surrendered to Secured	Creditor					
Name -NONE-	Amount of Claim	Description of Property				
10. The following liens shall be avoided pursuant to 11 U.S.C. § 522(f), or other applicable sections of the Bankruptcy Co						
Name Charter One	Amount of Claim 0.00	Description of Property 4451 286th St., Toledo, OH				
11. Title to the Debtor's property shall rever	st in debtor on confirmation of a plan.					
12. As used herein, the term "Debtor" shall include both debtors in a joint case.						
13. Other Provisions:						
Date March 30, 2015	Signature /s/ Paul Wenze	ıl, Jr.				

Paul Wenzel, Jr.

Debtor

In re Paul W	/enzel, Jr.	According to the calculations required by this statement:
	Debtor(s)	☐ The applicable commitment period is 3 years.
Case Number:	14-32432	■ The applicable commitment period is 5 years.
	(If known)	■ Disposable income is determined under § 1325(b)(3).
		☐ Disposable income is not determined under § 1325(b)(3).

AMENDED

(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

1	a. ■ 1 b. □ 1	•		omplete the balan		£41.: £41.					
1	b. 🗆 🛚	Unmarried. Complete only Column A ("Deb			Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.						
			a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.								
		b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.									
		gures must reflect average monthly income re	ceive	ed from all source	es, d	lerived during t	he six		Column A		Column B
		dar months prior to filing the bankruptcy case							Debtor's		Spouse's
		ling. If the amount of monthly income varied onth total by six, and enter the result on the appropriate the result of th			s, yo	ou must divide	the	Income			Income
2				•				Ф		d.	
		s wages, salary, tips, bonuses, overtime, con						\$	3,937.51	3	
3							e . Do				
	l —	Ia : .	d.	Debtor	ф.	Spouse					
	a. b.	Gross receipts Ordinary and necessary business expenses	\$ \$	0.00							
	c.	Business income		otract Line b from	-	ne a		\$	0.00	¢	
								φ	0.00	φ	
4	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV. Debtor Spouse										
	a.	Gross receipts	\$	0.00) \$						
	b.	Ordinary and necessary operating expenses	\$	0.00							
	c.	Rent and other real property income	Su	btract Line b fron	n Li	ne a		\$	0.00	\$	
5	Inter	est, dividends, and royalties.						\$	0.00	\$	
6	Pensi	on and retirement income.						\$	0.00	\$	
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B. \$ 0.00 \$										
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00 \$										

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.					
		Debtor	Spouse			
	a. bonus \$	266.00				
	b. \$		\$	\$ 266.0	50 \$	
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Co in Column B. Enter the total(s).	\$ 4,203.	51 \$			
11	Total. If Column B has been completed, add Line 10, the total. If Column B has not been completed, enter	ter \$		4,203.51		
	Part II. CALCULATION (OF § 1325(b)(4)	COMMITMEN	T PERIOD		
12	Enter the amount from Line 11				\$	4,203.51
13	Marital Adjustment. If you are married, but are not for calculation of the commitment period under § 1325(b) enter on Line 13 the amount of the income listed in Line the household expenses of you or your dependents and income (such as payment of the spouse's tax liability of debtor's dependents) and the amount of income devote on a separate page. If the conditions for entering this a. b.	\$	0.00			
14	Subtract Line 13 from Line 12 and enter the result	•			\$	4,203.51
15	Annualized current monthly income for § 1325(b)(enter the result.	\$	50,442.12			
16	Applicable median family income. Enter the median family income for applicable state and household size. (The information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
	a. Enter debtor's state of residence: OH	b. Enter deb	tor's household size:	1	\$	43,688.00
17	Application of § 1325(b)(4). Check the applicable box and proceed as directed. □ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement.					
	Part III. APPLICATION OF § 1325	(b)(3) FOR DETE	ERMINING DISPOS	ABLE INCOME		
18	Enter the amount from Line 11.				\$	4,203.51
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. S					
	Total and enter on Line 19.				\$	0.00
20	Current monthly income for § 1325(b)(3). Subtract	Line 19 from Line	18 and enter the result		\$	4,203.51

21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.							
	Applicable median family income. Enter the amount from Line 16.					\$	50,442.12	
22	 						\$	43,688.00
23	Application of § 1325(b)(3). Check the applicable box and proceed as directed. The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is detern 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.					nined u	ınder §	
		e amount on Line 21 is not 25(b)(3)" at the top of page						
		Part IV. CA	ALCULATION (OF I	DEDUCTIONS FR	OM INCOME		
		Subpart A: D	eductions under Star	ndar	ls of the Internal Reve	enue Service (IRS)		
24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					\$	583.00	
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount, and enter the result in Line 24B.							
	Persons under 65 years of age			Pers	ons 65 years of age or old	ler		
	a1.	Allowance per person	60	a2.	Allowance per person	144		
	b1.	Number of persons	1	b2.	Number of persons	0		
	c1.	Subtotal	60.00	c2.	Subtotal	0.00	\$	60.00
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is					nis information is e family size consists of	\$	448.00
	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.							
25B	the nur any add debts s	nber that would currently be ditional dependents whom a ecured by your home, as st	e allowed as exemption you support); enter on L ated in Line 47; subtract	s on y ine b	our federal income tax ret the total of the Average M	urn, plus the number of onthly Payments for any		
25B	the nur any add debts s not en t a.	mber that would currently be ditional dependents whom yecured by your home, as steer an amount less than zero. IRS Housing and Utilities is	e allowed as exemption you support); enter on L ated in Line 47; subtract ero. Standards; mortgage/ren	s on y ine b t Line nt expo	our federal income tax returns the total of the Average M b from Line a and enter the ense \$	urn, plus the number of onthly Payments for any		
25B	the nur any add debts s not en a. b.	mber that would currently be ditional dependents whom yecured by your home, as steer an amount less than zero. IRS Housing and Utilities Average Monthly Payment home, if any, as stated in L	e allowed as exemption you support); enter on Lated in Line 47; subtractero. Standards; mortgage/renter for any debts secured beine 47	s on y ine b t Line nt expo	our federal income tax rettethe total of the Average Mb from Line a and enter the ense \$\frac{1}{2}\$	urn, plus the number of fonthly Payments for any the result in Line 25B. Do 801.00 1,100.26		
25B	the nur any add debts s not en a. b.	mber that would currently be ditional dependents whom ye ecured by your home, as ster an amount less than zer IRS Housing and Utilities Average Monthly Payment	e allowed as exemption you support); enter on Lated in Line 47; subtractero. Standards; mortgage/renter for any debts secured beine 47	s on y ine b t Line nt expo	our federal income tax reti the total of the Average M b from Line a and enter the	urn, plus the number of fonthly Payments for any the result in Line 25B. Do 801.00 1,100.26	\$	0.00
25B 26	the nur any addebts s not ent a. b. c. Local s 25B do Standa	mber that would currently be ditional dependents whom yecured by your home, as steer an amount less than zero. IRS Housing and Utilities Average Monthly Payment home, if any, as stated in L	e allowed as exemption you support); enter on Lated in Line 47; subtractero. Standards; mortgage/ren for any debts secured beine 47 see tilities; adjustment. If the allowance to which	s on y ine b t Line t expo y you you you a	our federal income tax rett the total of the Average M b from Line a and enter th ense \$ r \$ Subtract Line b fr ontend that the process sere entitled under the IRS F	arn, plus the number of conthly Payments for any the result in Line 25B. Do 801.00 1,100.26 om Line a. t out in Lines 25A and Jousing and Utilities	\$	0.00

expense allowance in this category regardless of whether you pay the				
included as a contribution to your household expenses in Line 7. \square 0	\blacksquare 1 \square 2 or more.			
Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the	"Operating Costs" amount from IRS Local applicable Metropolitan Statistical Area or	\$	212.00	
The Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
you claim an ownership/lease expense. (You may not claim an owner vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy. Monthly Payments for any debts secured by Vehicle 1, as stated in Li	ship/lease expense for more than two e IRS Local Standards: Transportation court); enter in Line b the total of the Average			
	I¢ 517.00	,		
	517.00			
b. 1, as stated in Line 47	\$ 387.00			
	•	\$	130.00	
the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.				
	5 0.00			
b. 2, as stated in Line 47	\$ 0.00	,		
c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	0.00	
state, and local taxes, other than real estate and sales taxes, such as inc	come taxes, self employment taxes, social	\$	843.29	
Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.			0.00	
Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.			0.00	
Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.			0.00	
Enter the total average monthly amount that you actually expend for e	\$	0.00		
Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. Do		\$	0.00	
	expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expension cluded as a contribution to your household expenses in Line 7. □ 0 If you checked 0, enter on Line 27A the "Public Transportation" amount Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/- Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public Tr Standards: Transportation (This amount is available at www.usdoj.go court.) Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an ownership/lease expense.) Interval a www.usdoj.gov/ust/ or from the clerk of the bankruptcy. Monthly Payments for any debts secured by Vehicle 1, as stated in Line a www.usdoj.gov/ust/ or from the clerk of the bankruptcy. Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47 Local Standards: transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 C. Net ownership/lease expense for Vehicle 1 Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy. Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47 C. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as insecurity taxes, and Medicare taxes. Do not include real estate or sale of the Rocessary Expenses: life insurance	Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. 1	expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. 1	

	T	1		
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$	0.00	
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.			
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$	2,316.29	
	Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37			
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.			
39	a. Health Insurance \$ 247.67			
	b. Disability Insurance \$ 0.00			
	c. Health Savings Account \$ 0.00			
	Total and enter on Line 39	\$	247.67	
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$			
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.			
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local			
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$	0.00	
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.	\$	0.00	
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$	0.00	
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	\$	247.67	

		Subpart C: Deductions for D	ebt Pay	ment			
47	own, list the name of creditor, ic check whether the payment incl scheduled as contractually due t	claims. For each of your debts that is secur dentify the property securing the debt, state udes taxes or insurance. The Average Mon o each Secured Creditor in the 60 months f y, list additional entries on a separate page	the Aver thly Payr following	rage Monthly nent is the to the filing of	Payment, and tal of all amounts the bankruptcy		
	Name of Creditor	Property Securing the Debt	M	verage onthly yment	Does payment include taxes or insurance		
	a. Charter One	4451 286th St., Toledo, OH	\$	230.26	□yes ■no		
	b. Chase Bank	4451 286th St., Toledo, OH	\$	870.00	■yes □no		
	c. Ford Motor Credit	2011 Ford F-150 XLT	\$	387.00	□yes ■no		
			Total	: Add Lines		\$	1,487.26
48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.						
	Name of Creditor	Property Securing the Debt	ф.	1/60th of t	the Cure Amount		ļ
	a. Chase Bank	4451 286th St., Toledo, OH	\$,	112.67 Total: Add Lines	\$	112.67
49	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expenses.						0.00
50		hly Chapter 13 plan payment.	\$		0.00		
30	issued by the Executive information is available the bankruptcy court.)	our district as determined under schedules Office for United States Trustees. (This at www.usdoj.gov/ust/ or from the clerk on istrative expense of chapter 13 case	X	Multiply Li	6.80	\$	0.00
51		ment. Enter the total of Lines 47 through	•	Withtiply En	nes a and b	\$	1,599.93
31	Total Deductions for Delit 1 a	Subpart D: Total Deductions		ncome		φ	1,055.53
52	Total of all deductions from in	ncome. Enter the total of Lines 38, 46, and				\$	4,163.89
	Part V. DETER	RMINATION OF DISPOSABLE	INCO	ME UNDI	ER § 1325(b)(2	2)	
53	53 Total current monthly income. Enter the amount from Line 20. \$ 4,20					4,203.51	
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.					0.00	
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from					0.00	
56	Total of all deductions allowed	l under § 707(b)(2). Enter the amount fro	T	_		\$	4,163.89

	Deduction for special circumstances. If there are special there is no reasonable alternative, describe the special circumstances are provide your case trustee with documentation of these of the special circumstances that make such expense ne	amstances and the resulting expenses in lines a-c below. If the expenses and enter the total in Line 57. You must expenses and you must provide a detailed explanation		
57	Nature of special circumstances	Amount of Expense		
	a.	\$		
	b.	\$		
	c.	\$		
		Total: Add Lines \$ 0.00		
58	Total adjustments to determine disposable income. Adresult.	d the amounts on Lines 54, 55, 56, and 57 and enter the \$ 4,163.8		
59	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.			
	Post VI ADDITIO	ONAL EXPENSE CLAIMS		
	of you and your family and that you contend should be an	not otherwise stated in this form, that are required for the health and welfare additional deduction from your current monthly income under § a separate page. All figures should reflect your average monthly expense for		
60	Expense Description	Monthly Amount		
	a.	\$		
	b.	\$		
	c.	\$		
	d. Total: Add	\$ Lines a, b, c and d \$		
	Part VII	. VERIFICATION		
	must sign.)	vided in this statement is true and correct. (If this is a joint case, both debtors		
61	Date: March 30, 2015	Signature: /s/ Paul Wenzel, Jr.		
		Paul Wenzel, Jr. (Debtor)		